

Faculty of the College of Medicine of the University of Southern California, and when that institution became a graduate school under the name of the Los Angeles Medical Department of the State University of California, he became the Dean of the latter institution.

In medical societies he has always been an interested worker and was for many years the Councilor from the Los Angeles district in our State Society.

In the Los Angeles County Medical Association, as the Secretary-Treasurer and Executive Officer, it has been his privilege to institute many movements that have made for the stronger development of that unit of our State organization. In a literary way, Dr. Kress has also contributed freely to scientific journals on the topics in which he is interested.

He was elected a Councilor-at-large at the recent San Diego meeting, and in that capacity our State Society hopes to have the continued use of his broad experience on the many matters of medical organization which nowadays seem to confront us in such large measure.

### ORGANIZED MEDICINE—A CONSIDERATION OF SOME OF ITS CALIFORNIA PROBLEMS.\*

By GEORGE H. KRESS, B. S. M. D., Retiring President, Medical Society of the State of California.

Custom prescribes that your retiring president shall deliver an address on some subject related to the profession of medicine.

The topic on which I shall speak may to some of you, in one sense, seem to be somewhat non-scientific, but even so, it might still be possible that it is perhaps much more needed by our State Medical Society than a dissertation on some purely scientific subject.

Let it first of all be distinctly understood that what is here presented, no matter how seemingly dogmatic its mode of presentation may appear, is offered only and absolutely in the way of suggestion.

It is also quite possible that the viewpoint given may be in error, but if this be the case, it has at least the merit of having been founded on years of a rather active experience in the largest county medical unit in our State, so that some of the items discussed may perhaps be of value to others.

In the first place, permit me to state that I am not only in hearty accord, but a very firm believer in the system of organization of our medical societies as inaugurated by the American Medical Association in 1900, whereby, instead of a loose organization composed of national, state and local societies of miscellaneous grouping and scope, there has come into existence one powerful national association—the American Medical Association—made up in turn of the state societies, and these on their part consisting of local organizations known as county associations.

In this plan of the so-called reorganization of

the American Medical Association, the mode of admission and of membership into any one of these three types of societies, namely: the national, the state or the county units, is by the invariable route of the county unit, in the place where the applicant is practicing his profession, and where his career is necessarily best known, admission to the county unit making the applicant at one and the same time a member of his respective state society and of the A. M. A.; fellowship in the last named, with subscription to the Journal, being conferred when an additional fee of five dollars is paid.

This review of the plan of organization is given to show both its simplicity and practicability. As to its efficiency, the chaotic condition of organized medicine in national, state and county units prior to the year 1900 is still vivid in the memory of many of us, and the wonderful advance since that period we may in very large part ascribe to this newer and far superior method of operation, for which we may indeed be grateful, and which we should be very slow in changing to any great extent. Let us try to keep in mind that such deficiencies as exist under this plan are more often manifestations of weakness of administration rather than of weakness of the plan itself.

Through this excellent and businesslike reorganization of the American Medical Association and of its respective state and county units, there has come about, not only an almost marvelous betterment in the scientific and business proceedings of all three types of organizations; and because of the much sounder financial condition of the national organization, it has been possible for the American Medical Association to step beyond its one-time perfunctory routine of being nothing more than an organization which once a year permitted a small number of members to come together in scientific and social sessions, and to take on activities which have played an almost marvelous part in placing the practice of medicine on a higher plane in America.

Of such, may be mentioned: the publication of a very high class scientific and yet very financially remunerative Journal; the work of the Council on Pharmacy and Chemistry, which has done splendid service in eradicating much of the patent and proprietary medicine evils; the propaganda of the Council on Health and Public Instruction, through which work of the very highest type in preventive medicine, has been constantly inaugurated; the program of the Council on Medical Education, by means of which the deplorable conditions associated with proprietary medical schools have not only been in good part eliminated, but the basis at last laid, in many of the larger cities, for offering medical training of such splendid scope and facilities as to make our American medical schools, in these last fifteen years, to change from what might be called a stench to our ideals, to a condition in which no country in the civilized world will be able in the very near future to offer anything that is one whit better.

Now, all these things, when we get down to the very bluntness of the situation, we must in a good part ascribe to that splendid plan of reorgan-

\* Address of the Retiring President, Medical Society of the State of California, at the Forty-sixth Annual Meeting, San Diego, California, April 17, 1917.

ization of the American Medical Association, instituted in 1900, and to nothing else, and by means of which that organization was able, first, to outline for its subordinate units an efficient method of self-government; while, second, for itself, it was enabled to accumulate the funds whereby it became independent and of sufficient power and wealth to permit at least some of the ideals and aspirations of its members to reach actual realization, in such special domains as scientific research, public health procedures, higher standards of medical education, elimination of patent medicines, and so on.

It may be quite true that there may be one or more other and different methods of bringing about the realization of the ideals of the medical profession of these United States, which methods or plans, idealistically considered, may seem more desirable than the rather practical and common sense plan now in vogue in our country; but certainly the exponents of such supposedly better and more ideal plans of organization will have a tremendously hard time explaining away the deplorably low state of organized medicine in the days prior to 1900, as contrasted to the remarkable progress made by our national and our various state and county units since that period of reorganization.

With these words on our general system of organization, permit me now to digress, so that I may present some thoughts of a somewhat more local and practical and perhaps detailed nature, which may be worthy of consideration in connection with the subject of organized medicine as related to the state and county units in California.

To begin, let us ask ourselves as to the actual objects, which in a broad measure we seek to attain in our county societies, and which in most commonwealths, where economic, geographical and political organization of counties and state be not too diverse, might be said to apply with almost equal force to our state societies as well.

In the first place, in all groupings of organized medicine, I think we may assume that we get together and form societies in order to learn how to better do the work in this particular profession which we have chosen as our life work. In other words, we seek through our societies to help make of ourselves better doctors, and we get together and form societies, in an effort to bring about this end.

Now, just as the practice of medicine is itself both an art and a science, so do we find that in our societies we must take into account something more than the purely cold-blooded scientific phases of our profession. For, if it were only the question of the absorption of scientific information, it is quite possible that this could be obtained just as well by many of us from the scientific publications of medicine, and with expenditure of less time and effort, than through medical societies.

As a matter of fact, when we analyze our medical organizations we find that we both seek and derive much more than a simon-pure scientific pabulum from them; and that the something more, which often is quite as important as the scientific food, may be said to be the good fellowship and

better social and professional understanding which comes from actual personal and social intercourse and contact with colleagues whose lives, like our own, if left to the natural routine of professional endeavor, are little more than somewhat isolated and very personal existences.

It may be further noted that it has been this personal and scientific isolation, with community of interest more between ourselves and our patients than with our professional colleagues, that has been at the bottom of so much of our ineffective attempts at co-operation in the past, and which even to-day exists with sufficient force to nullify much of the influence to which, in individual and public health work, the medical profession is in one sense so fully entitled.

Now, herein, we have a further fact for very sober reflection, and that is this: that in many communities, in spite of a splendid system of organization, whereby we can work through constituted officers and authority to express our viewpoints, the great mass of our fellow-members fail to give that practical co-operation and support in public health measures which the nature of our political organization in civil life demands, if the public health aims to which we are devoted are to be properly attained.

It may be a noble thing to be wedded to ideals, but facts are facts, and while the days and environment in which we live demand that we continue to be loyal to ideals, we nevertheless should mold our course of action along those lines which will actually give results.

For we cannot get away from the fact, be it a reflex of the superficial type of newspaper and magazine education so prevalent now-a-days, or what not, that scientific and preventive medicine receives but faint and half-hearted support from the very laity whom it is primarily intended to serve.

Of course, the explanation in good part is this, that we who have delved and obsessed ourselves with our scientific problems, have failed almost utterly to sufficiently take our lay fellows into our consideration or confidence; and we are tremendously shocked, and usually quite disgusted, when we launch an absolutely altruistic public health measure to find a majority of our legislators, in response to more vigorous and more successful education from faddish and vicious sources, almost always arrayed against us.

Now, all this line of thought that has just been given is intended to simply bring out the concept that for some reason or other, we medical men, not alone as individuals, but often through the constituted officials of our medical organizations, lack a certain amount of that thing which by the name of common sense is known and made use of by our practical fellow laymen, who with far lesser light or right, often attain far greater success in the measures for which they choose to be propagandists.

And that is the very special plea which this address would make to you fellow doctors of California,—that you display just a bit more of the common sense which your education warrants all

men in believing you ought to have, and that you exert your common sense efforts in such excellent co-operative spirit as to actually attain the results by which your ideals in part or in whole, may come to be realized.

Let us, therefore, not blame our fellow laymen entirely. They are willing to follow us if we will explain clearly what and why we want certain meritorious laws.

Let us illustrate this by a concrete California case. We know, that for years, all that we have sought in the way of laws which have to do with the granting of the legal right by the State of California to practice the profession of the healing art, has been a set of legal provisions, whereby only properly prepared practitioners should be permitted to hold themselves before the public as competent persons in a profession, whose members so often have the responsibility of almost holding life and death in the hollow of their hands. Now, that is a simple thought and properly explained and amplified, one to which the great majority of laymen gladly subscribe; namely, that when any of them calls in a legally licensed doctor, that such doctor shall be a practitioner actually competent to treat injury and disease. Of course, in framing a law to such an end, many difficulties are met with, but with the majority of the laity in favor of the fundamental proposition, it may be assumed that the majority of the state legislators could also be made to see the matter in the same way. And yet, we all know the recurrent fights in each Legislature of California on all matters dealing with state medical licenses, in which year after year, we have suffered this, that or the other partial defeat.

Our trouble comes when we seek to place such a law on our statute books, in that we ourselves get away from the fundamental, basic, actual truth of the proposition, and permit faddists and vicious commercialists to becloud ourselves, the legislators, and the issues at stake. We are, seemingly, too proud (and we ought to add, also too blind) to use the methods of procedure everywhere in vogue with legislatures, by our lay fellow citizens, whereby they accept our system of government as it is, and without degrading themselves or debauching legislators or others, gladly avail themselves of all procedures whereby legislators may the more easily and clearly see the real purpose of proposed laws, and the more gladly support those which stand for the best and highest interests of the people at large.

At the time this paper is being written, our present California Legislature is in session, and the usual grist of laws having to do with medical licensure have been submitted. It is a fair question to ask, how many of those present in the sound of my voice have actually done something to see to it that the right kind of laws will be enacted? We might even go farther and ask how many county units have done active work? Yes, and even farther, and ask, what has our State Society done to keep in that really active and vigorous touch with the Sacramento situation,

which is in vogue by lay organizations having far less meritorious interests at stake than ourselves?

Have we as individuals, or as county, or state units used the methods in actual practice by Chambers of Commerce, public utility corporations, other professions and special interests, to see to it that there was on our behalf at least one representative, be he layman or medical man, at Sacramento, whose work it would be to see to it that we were all of us kept in constant touch with the trend of opinion of our legislators on these public health measures?

If there be among you those who would be shocked at this thought of a paid Sacramento representative to watch the situation and keep the rest of us informed (mind you, let no one say, that I advocate a representative improperly to solicit or debauch), then I would ask such of you as have this horror, what you of yourselves did prior, and after, the election of your respective state legislators to educate them on these public health matters now being considered at Sacramento; and granting that you did your own particular part in certain particular instances, whether or not you think you showed good common sense in imagining that your lone effort, if unsupported by like effort by every other county unit and by other members, would amount to very much.

Of course, in the good old days when legislators were controlled by a few bosses, it was not so necessary to so constantly be on the job. In those days, influence with the one particular right man took care of the entire proposition. But now-a-days things are different.

But because they are different, must we refuse to play, and sulk, and, after calling everybody else ugly names, wrap ourselves in a mantle of righteous self-glorification and self-satisfaction?

Granted that it may be proper to wrap one's self in that kind of a mantle, is it creditable to do so? Is it common sense? Is it fair to our profession and what we would have it attain? Isn't it really a foolish, egotistical and ridiculous attitude to assume?

Now, the solution of all this is simple, and that is, that we obtain a better understanding of ourselves, our profession, our objects in professional life, and especially of the means to be used in attaining these objects. Permit me along this line to offer a few practical and what I construe, important suggestions, even though to some of you they may seem commonplace and not pertinent to thought on so dignified an occasion as this.

First, let us start with our basic or county society unit. Let us recognize that we must have a good practical constitution and by-laws so drafted as to permit the scientific and social ends of our county units to be most easily and persistently carried on. Our larger county societies have printed copies of their rules of government and these they will gladly send to other units. With modifications for local environments, they can be made to do service almost everywhere.

Then, let us appreciate that *quite as important as our scientific sessions, are the social features of*

our county societies, and that nothing so much helps the development of better personal understanding among members, as informal buffet lunches, whereby members linger after meetings, to enjoy one another's fellowship and become better acquainted. Only in that way, can we keep down to a minimum, the professional jealousies and misunderstandings, which, because of the nature of our work, have so splendid an opportunity to develop, and which we must acknowledge so often unfortunately do develop. The Los Angeles County Medical Association has for years had such buffet suppers after all its meetings, and I am personally convinced that were we to do away with that feature of the Los Angeles meetings, that then we would again drift back to the old days of personal antagonism and so-called cliques.

Annual banquets, formal or informal, or annual picnics for smaller societies, are other measures along the same line as the foregoing.

Another thing is to properly segregate work among special committees, and to induce our *County and State Society committees to actually do their respective work*. In Los Angeles (if you will permit these references to the unit with the work of which we are most familiar), we have lately inaugurated the plan of having all the committees meet together several times during the year, as a sort of a committee of the whole, in order to create better an enthusiasm in the various lines of work. This we do at an informal supper prior to one of the regular meetings. The tendency in committee work is to either do no work or unload all work on the one, two or three executive officers of a society. This is wrong, and wrong not so much because it throws an undue and unfair share of the work on a few who may at times be perfectly capable or willing to accept this burden, but wrong because thereby the other committee members who are supposed to become interested in special problems, fail to do their part, and the capacity for effective co-operation in the society at large, is just that much lessened, and then in big, vital issues, our disjointed efforts are apt to be rewarded by failure.

In our larger county units, *printer's ink should also be generously used*. Suppose it does cost money to print things, if the end result is to make a stronger and more unified society, the money will not have been spent in vain. Our societies are loosely organized; they need a vehicle of communication in the shape of some sort of a bulletin, which will tell them what is going on.

Second, as regards our State Society, is it not true that this State Society of ours, is after all, only a very large county society?

We should recognize, for instance, that in our State Society we have the opportunity of coming together only once a year. Let us hereafter see to it, that in our three days' session, we *come together always in an environment that will permit us all to live in as intimate social contact as possible*. In this big state of ours, there are three large hotels which especially offer these advantages; namely, the Del Monte at Monterey, the Hotel Potter at Santa Barbara, and the Hotel Coronado

at San Diego. When we have our meetings in these places, all of us practically housed under one roof, the advantages for better social intercourse and exchange of opinion and of agreeing on one course of action, are far greater than when the members are scattered in a half dozen or more different hotels. The idea that a state meeting helps the local county society greatly and that we ought on that account to go to the different smaller cities, is, I think, a great mistake. The local societies could spend the money for entertainment to far better advantage on their local needs than on entertaining out-of-town members. Moreover, local city members are the poorest of all in attendance. If, therefore, the county associations are not greatly benefited and the State Society, decidedly not benefited, let us follow the system which past experience has shown to be so excellent, and cling closely to Del Monte and Santa Barbara, and occasionally to San Diego. I advocate this plan because I so thoroughly believe in its value to our State Society.

I hope that the *plan of synopses of the scientific papers*, which was this year introduced, will hereafter be the accepted procedure for all accepted scientific papers. When I requested the Council to authorize me to work on this matter, in conjunction with the Committee on Scientific Program, I felt that if this plan could be inaugurated, it would be a big step forward in securing more interest in the annual meetings, and in bringing about much more pertinent and valuable discussions. Through the good work of our Scientific Program Committee, an excellent standard has now been set, which, it is hoped, will not be departed from in the years to come. Our different scientific sections, by proper resolutions, should instruct their section officers to call for the same procedure on the part of all section members.

It is a source of great regret to me that the finances seemed this year to make it appear impossible not to have *medical stenographers* for each of the scientific sessions. Personally, I think this expense one which our State Society might legitimately have contracted, even though the state funds for the moment, were low. Certainly the printed proceedings in our State JOURNAL would have been just that much more interesting to members not attending the annual meeting. A medical stenographer should be placed at the disposal of each scientific section, because this plan will make for better meetings and for better reports in the JOURNAL and thus for a really stronger State Society. If the plan has partially failed in the past, it was probably due to the defective manner in which we tried to institute the system.

*As regards legislation having to do with public health matters and licensure of practitioners of the healing art*, I believe our State Society should do much more active and more effective work than it seemingly has, during the last several sessions of the Legislature. I believe our Society should have a paid representative at Sacramento, who could be either a regular employe of our Society, or who might be some former member of that body (whose past record would be an evidence of his integrity)

and who, while perhaps doing similar service for Chambers of Commerce and others, would make it part of his work to send out bulletins to the State Society and the county units, keeping them informed as to location of bills in committees, names of special antagonists, and so on, so that all county units might lend a helping hand in aiding in the passage of much to be desired legislation. This year the southern counties created such a fund in order to do their bit, but this is a work not for a part, but for the entire state.

Whether the plan just advocated is the one most worthy of adoption may be a question, but that our present comparatively inactive State Society co-operation in legislative work is also undesirable, cannot be disputed.

Mention of the value of printer's ink was made in connection with county society activities. It is equally valuable and important in State Society matters.

With the passage of the new state law for an additional state license tax, taxing all doctors \$2 yearly, for which sum each doctor so taxed receives a state board medical directory, it would seem to be no longer necessary for our State Medical Society to publish an annual directory. *However, a year-book of some sort*, to be sent without cost to every member, and which because of the lesser expense, could perhaps be made to pay for itself from its advertisements, might not be out of place. Such a year-book could contain all that information which, not only new members, but which many old members at times desire. The rules of our malpractice defense, of our indemnity fund, our fee tables, our constitution and by-laws, the rules of our scientific program committee, the lists of our officers and committees, and probably also the simple list of names of our members by geographical location, all could serve a distinct purpose in such a publication. Certain portions thereof would probably be the same from year to year, and if electroplates were made for such portions, the expense could be materially cut down. The entire arrangement of the subject-matter should, however, be so logically and clearly arranged, and so well indexed, that even they who run, might read.

In connection with this subject of printer's ink, the question might also arise as to whether the plan of *correspondents from the various societies to the State JOURNAL* could not be again taken up. The human interest element is a vital one among all groups of men, and to take cognizance thereof, need not lead us to depart in the least bit from the scientific standards of the original papers contributed to our State JOURNAL.

Other societies do these things and to their advantage, and we may well ask ourselves whether similar measures would not be of benefit to us.

Your president has long been impressed that through our State Society many things could be instituted to the benefit of all county units, once such measures had been found of value in individual county societies.

Why should not the State Society, which is so tremendously interested in having every desirable

practitioner in California a member of his county unit, carry on *an active campaign for new members*, instead of leaving this work almost entirely to the haphazard efforts of county secretaries? In this and in many other matters, our State Society might well have *standard printed forms* in stock which our smaller county units could purchase at cost. The dues of a few extra members secured through such paternalistic effort by our State Society officials, would more than pay the cost of printing, and the Society itself would be the gainer, not only through the addition of new members, but also through the better co-operation of county society officials with those of the State Society. It must be remembered, however, that state officers who take up this work must be medical organization optimists, and be willing to try out and repeat these measures again and again, even though there is but feeble co-operation in the beginning. If the fundamental idea is sound, repetition of effort, if along practical lines, is bound to ultimately bring good results.

We have always been impressed with the fact that *we cannot make our county and State Society membership too rich in material advantages*. In other words, we should aim to give every member such a large amount of material benefits for the money which he pays in dues that no matter what those dues are, he cannot but feel, that as a financial proposition alone, county and State Society membership is absolutely indicated for every ethical practitioner of medicine.

Along that line *a telephone exchange*, especially for our larger cities (such as that of the Los Angeles County Medical Association, which some three years ago started its existence with a total of less than three hundred calls in its first month, and which since that time has worked up to an average of over 10,000 calls per month) is an excellent example of society effort which works to the advantage of all members, but especially to the younger and newer members from other communities, and thus is a very big incentive to inducing every new doctor in the community to seek membership in his county medical society.

Another instance was *the collection slips* for patients delinquent in their payments, which were used several years ago. A few cents' expenditure by the State Society would place these in the hands of every member and would make many members grateful for this co-operation and much more willing to have \$1 more of their dues be sent from their county to their State Society.

Moreover, in this particular matter, in teaching the profession throughout the state to follow up their business relationships with patients in business-like manner, a real and further service would be rendered the profession.

When we have had the funds to spare in Los Angeles, our Council has never hesitated to spend such money for material benefits which our members could enjoy and, while such activities rarely had the sanction of all members, there could be no doubt but that real progress was made and that the Society became a stronger county unit through the adoption of the same.

In line with this thought, we have only to remember how big a factor has been our *State Society malpractice defense* in building up the membership of our state organization. It may, in fact, be said to have been the one special and tremendously large factor in securing the membership of many who have joined our state unit in recent years. Any who doubt this need only review the history of our State Society of years ago, when, although it had a state name as to geographical scope, it was almost as distinctively a district organization, as was and is the Southern California Medical Society.

The question here arises as to whether our State Society might not profit through the *formation of district organizations*, say one in Southern California, one for the bay cities, one for the Sacramento Valley and one for the San Joaquin. If states of small geographical area find such organizations of value, why should not we of much larger geographical domain? Only here also constant co-operation and nursing through state officials would be necessary to attain the highest usefulness for such district associations, which would meet once every year or so, at cities within their respective geographical districts.

Before closing this paper and without in any way desiring to trench on the domain of the two special committees appointed by me at your order, to report on these two subjects, your president would say a few words in regard to the present Industrial Accident and State Compensation law and the proposed Social Insurance law.

Our *Industrial Accident and State Compensation Act* is here, and here to stay. When our Society took up this matter several years ago, and agreed to a minimum fee table lower than the average, the basic thought insisted upon, was that this work should remain open to all members; in other words, that any attempt at commercializing it, as for instance, through a few members contracting for all the work of a company, and then directly or indirectly, farming this work out at less than the fee table rates to other colleagues, should be frowned upon and forbidden. This issue has since arisen and should be met by a clear statement from our State Society, so that county units may the more easily take the proper local action. With a clearly outlined State Society policy, the local societies can take proper action with a minimum of ill feeling and animosities between members who do and who do not live up to the rule.

As this paper is being written, the daily press contains a notation of the rejection by the Senate by a vote of 21 to 11, of the resolution which would have called for a popular vote on the constitutional amendment or enabling act which would permit our state to institute *Social Insurance*. If this action stand, then the immediate danger in this matter is postponed for the next two years at least. Since writing the above the Senate has reversed its action and voted that an enabling act be submitted to the people and the chances are good that the Assembly and Governor will also endorse it.

Of course, in one sense we are all of us in

favor of the end object of social insurance, namely, the protection in the fullest measure of the health and lives of our fellow citizens of limited income. Certainly our profession, of all groups, can be least accused of being indifferent to the needs of our lay fellows in humble environments, because it has been the medical men who have at all times, and in a large measure, often gratuitously, responded to the needs of these lay fellows, when ill or injured.

To extend aid to those who need it, without question of individual compensation, and simply as a matter of mercy, is, however, one thing, and, no matter how gladly we have and are still willing to do this, the proposition is a very different one when a plan is proposed and exploited by a small number of persons in the state, whereby more than 50 per cent. of the population (probably 66 per cent. or so) of this rich and rather free from poverty-conditions commonwealth would be taken from the domain of private practice to become part of what might be called a large insurance or lodge clientele.

In so radical a change as that which is proposed, there can be little doubt but that our profession would be made to suffer in both its material and professional relationships. Without going into this subject further, which will be considered at greater length by your special committee, permit me to emphasize with that committee that if there is at this time, any one particular problem that is vitally concerned with organized medicine in California, it is this proposed law with which we are now face to face.

The thought we would further impress upon you is this: that the best time to preserve the present system is at two stages; one, while the proposed enabling act is being considered in the Legislature, where we have to deal with only a very few men, whom it ought to be possible to educate to properly consider the professional and material positions of the medical profession in this matter; or two, when the proposed enabling act, once it be passed by our Legislature, and which would require a two-thirds popular vote to become a law, goes before the people of the state, and where again, because of the lesser number of political units whom we would have to deal with, and so on, we might likewise have a better chance of success.

Let us not delude ourselves in this matter. Social insurance as proposed will probably wreak havoc and disaster for many members of our profession and relegate many of our members either out of practice or place them on a decidedly lesser professional, social and material scale. If two-thirds of the state's population would be involved in this law, probably two-thirds or more of the doctors would also be involved.

Further, let us remember again that it behooves us in this, as well as certain other public health problems in which we are interested, to build up a different system of political activity and action, whereby we may successfully (just as do our lay fellow citizens in business and all other walks of life), the better protect those fundamental rights

and interests in which we are interested. In other words, that we really build up as part and parcel of organized medicine a plan of procedure in political matters which will adequately and successfully protect those legitimate rights, which we, as members of a learned profession, doing no end of altruistic service for our lay fellows, have a right to expect to see properly protected.

To do this is neither debauchery or treason of our own code of ethics or principles, but is just plain every-day common sense, and is a much wiser course of procedure than presenting the spectacle of letting the ill be done and then all of us running about much after the fashion of chickens which have had their heads cut off.

So that as part and parcel of this talk on organized medicine, we make a plea for a far more active and practical activity than we have been manifesting in the last several years, believing first that we are fully justified in so acting; and second, holding that our fellow members who elect certain of us to office as councilors and so on to act for them, have a just right to expect us to use that judgment and action, which it is understood we possess, when we consent to permit our names to be considered as officers in our medical societies.

In conclusion, permit me to state that I appreciate that this address may be somewhat unsatisfactory from the scientific standpoint, but that I, nevertheless, feel that you may well give a half or one hour or so of serious consideration to some of these problems which are so intimately connected with your daily lives and your future careers, and which problems, if not adequately considered, may make your professional careers much less pleasant for you. Of course, a goodly number of members of our society who are firmly entrenched in professional life, with large numbers of well-to-do clients, can go on their way without bothering about these matters. But there is a much larger number of lesser paid colleagues, both old and young in years, who may be vitally involved in these matters, and it is for the interests of these colleagues that we would especially plead.

My plea is then for a more earnest recognition of the many problems which face our organization, and for a call for members who will try to solve them in such earnest and successful fashion that while we are so engaged, the purely scientific, the social and the professional phases of our work shall each in their proper spheres, go on to highest and fullest realization. And this I am firmly convinced can be all brought to pass, if we only go about our work, in right fashion.

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## MINUTES OF THE HOUSE OF DELEGATES FORTY-SIXTH ANNUAL SESSION

### OF THE MEDICAL SOCIETY OF THE STATE OF CALIFORNIA CORONADO, APRIL 17th.

#### First Session.

#### Roll Call:

The roll being called, sixty (60) Delegates were found to be present, and the president, Geo. H. Kress in the chair, declared that there was a quorum of Delegates and that the House was ready for business.

#### Report of President:

The report of the president was made verbally, and merely referred to his annual address which had already been read. He then appointed the following members to act as a Committee on New Business and Reports: W. R. Molony, Los Angeles; Geo. G. Reinle, Oakland; Gale G. Moseley, Redlands.

The Chairman of the Council, Dr. Kenyon, then read a report from the Council, which was referred to the Committee on New Business.

In explanation of certain phases of Medical Defense, the General Attorney, Mr. Hartley F. Peart, was called upon. He made a verbal report, a resume of which was ordered by the President to be referred to the above committee, and later to appear in the Journal.

#### Report of Auditing Committee:

Was read by H. A. L. Ryfkogel, with an explanation and elucidation of our financial status, including certain recommendations as to increase of State dues. This was referred to the Committee on New Business.

#### Treasurer's Report:

Being the Union Trust Company, San Francisco, no report. \$13,052.52 in bank.

#### Report of the Publication Committee:

A report from the Publication Committee was read by René Bine. Referred to the same committee.

#### Report of Secretary:

Temporary Secretary made a verbal report as to membership, office work—being summary of a written report. Referred to Committee on New Business.

#### Special Committees:

C. P. Thomas read a report on Industrial Accident Insurance. This report was referred to the Committee on New Business.

#### Advertising Committee:

R. E. Bering made a verbal report as a Committee on Advertising and pleaded for greater co-operation on the part of members in giving patronage and assistance in this matter.

#### Publication Committee:

René Bine read a report on the Publication Committee which was referred to the Committee on New Business.

#### New Business:

The following resolution was read by J. H. Graves concerning Industrial Accident Insurance. It was moved by H. Bert Ellis, seconded by A. B. Grosse, that no action be taken in this matter until it had been referred to the Committee on New Business. Voted and carried.

#### Graves' Resolution No. 1.

Whereas, There is pending before the State Legislature an act to enable further study of the Health Insurance problem with a view to providing for the State of California a compulsory Health Insurance for wage workers; and

Whereas, The successful operation of Health Insurance laws, where in force in other parts of the world has not been a marked success in accomplishing that for which they were intended; and

Whereas, The State of California has so recently